

								Application or Docke: Number						
	PATENT APPLICATION FEE DETERMINATION RECOP								3000-0107PMS/					
		10/5/6674												
CLAIMS AS FILED - PART I (Column 1) (Column 2)									ENTITY		_	THAN		
TO	TAL CLAIMS	<u> ئىرىدە ئى</u> رونلىكىنىكىنىڭ ئ	(Coloini 2)				1	RATE	FEE	) 1	SMALL	•		
FOR			NUMBER FILED NUMB			ER EXTRA				1_	BASIC FEE	FEE		
TOTAL CHARGEABLE CLAIMS						EN CATINA				OR		950		
•			minus 20=					XS 9=		PO	X\$18=			
INDEPENDENT CLAIMS  MULTIPLE DEPENDENT CLAIM P			minus 3 =					x 44		OR	x 33			
·		DENT CLAIM P	RESERVI				İ	+150		OA	+300	300)		
* H	the difference	in column 1 is	less than zero, enter "0" in co			column 2	•	TOTAL		OR	TOTAL	1230		
15	2001	LAIMS AS A	MENDEC	MENDED - PART II							OTHER			
	1900	(Column 1)"	(Column 2)			(Column 3)	r	SMALI	ENTITY	OR 1	SMALL			
AMENDMENT A	: .	REMAINING AFTER AMENDMENT		NUMI PREVIO PAID I	BER	PRESENT EXTRA	Ė	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. /7	Minus	-2	0	s ~~~		XS 9=		OR	X\$18=	-		
AKE	Independent	• /	Minus	-3			Ì	x 44	****	OR	r 88			
ш	FIRST PRESE	NTATION OF MI	JETIPLE DEPENDENT CLAIM					<b>*</b> 150		റെ.	L 200			
								TOTA		00	TOTAL			
	4/13/07	(Column 1)	٠	·(Colun	nn 91	(Column 3)	. <b>A</b>	NODIT. FE	E <b>L</b> _	JUN	ADDIT. FEE			
8	CLAIMS REMAINING			HIGHEST NUMBER	EST		Г		ADDI-			ADDI-		
AMENDMENT B	4/5/17	AFTER AMENDMENT		PREVIO	USLY	PRESENT		RATE	TIONAL		RATE	TIONAL		
	Total	• 17	Minus 🛰	- 2	U	- Ø		· X\$ 9=		OR	X\$18=			
AME	Incependent	•	Minus		3	=0	ı	<del></del>		OR-				
	FIRST PRESE	NTATION OF MU	ULTIPLE DEPENDENT CLA			<b>M</b>					•	1		
					,	•	Ł	TOTA		OR	TOTAL	/ .		
				•		•		DDIT. FE		OR	ADDIT. FEE			
	· · · · · · · · · · · · · · · · · · ·	(Column 1) CLAIMS		(Colun		(Column 3)		•		1	•			
ENT C		REMAINING AFTER AMENDMENT	·	NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MON	Total	•	Minus	94	,	e . '		X\$ 9=	·	OR	X\$18=	•		
AMENDMENT	Independent	•	Minus			. 2	-	•			•			
۲	FIRST PRESENTATION OF MULTIPLE DEPENDENT.CLAIM							•		OR				
". If the entry in column 1 is less than the entry in column 2, write "o" in column 3.										OR	TOTAL	•		
	If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 20, enter 20. ADDIT. FEE											<u> </u>		
		iber Previously Pal					lous	nd in the a	ppropriate bo	in co	lumn ti			